

Testimony of Kenneth E. Weg, Vice Chairman Bristol-Myers Squibb Company  
before the Committee on Banking and Financial Services  
The Global AIDS Crisis and Pandemic in Africa; H.R. 3519, the World Bank AIDS  
Prevention Trust Fund Act  
Wednesday, March 8, 2000  
10:00 a.m.  
2128 Rayburn House Office Building

Mr. Chairman, Ranking Member, Representative Lee and other distinguished members of this Committee, I want to thank you for the opportunity to testify before this august body. I am Kenneth Weg, Vice Chairman; Bristol-Myers Squibb Company. Bristol-Myers Squibb is a diversified worldwide health and personal healthcare company whose principle businesses are pharmaceuticals, consumer products, nutritionals and medical devices. It is the leading maker of innovative therapies for cardiovascular, metabolic and infectious diseases, central nervous system and dermatologic disorders, and cancer. The company is also a leader in consumer medicines, orthopedic devices, ostomy care, wound management, nutritional supplements infant formulas and hair and skin products.

Mr. Chairman, I commend you and Rep. Lee for your efforts to help funnel much needed funds to support this fight against HIV/AIDS. In the southern part of the African continent, in South Africa, Botswana, Namibia, Lesotho and Swaziland, HIV/AIDS is particularly devastating to women and children. Women account for about half of all infected adults, and in the teen years infection rates are typically far higher in females. In some countries, more than 25 percent of pregnant women are infected – in Botswana, for example, an estimated 36 percent of pregnant women have HIV/AIDS – and risk passing the virus to their newborn babies. Already, in these five southern African countries, there are close to 100,000 children living with HIV/AIDS. Many children have lost their parents to HIV/AIDS to the extent that there are now more than 180,000 such orphans in South Africa alone.

Mr. Chairman, after careful study of the HIV/AIDS problem in the hardest hit areas of sub-Saharan Africa, Bristol-Myers Squibb Company decided to take a first and unprecedented step with governments, physicians and non-governmental organization (NGOs) to help alleviate the HIV/AIDS crisis in the region. In May of 1999, we announced SECURE THE FUTURE™, A \$100 million commitment, that over five years, is helping women and children in southern Africa infected by HIV/AIDS.

This initiative is the largest such corporate effort in history. As a global leader and caring expert in the field of HIV/AIDS we felt it was the right thing to do, being consistent with our mission: to extend and enhance human life.

Because of the sheer magnitude of the AIDS crisis in Africa, we agree that a comprehensive, multi-sectoral response, led by committed governments, is the best way in which to address this crisis. The response must address both educational campaigns to change attitudes and behavior at the community level to curb the spread of HIV and enhance the capacity of health systems to deliver essential medical care to the people living with the disease.

SECURE THE FUTURE™ is an initiative doing just that. Simply put, our goal is to expand the general understanding of how to deal with HIV/AIDS in countries where resources are severely constrained. We are working in partnership with governments, physicians, community and non-governmental organizations in order to complement the broader efforts to identify relevant, cost-effective and sustainable programs for managing the disease. More specifically, we are using our strengths as a leader in scientific and medical research, our experience in community outreach programs gained through the Bristol-Myers Squibb Foundation, and its financial resources to help tackle the HIV/AIDS problem in these five countries of sub-Saharan Africa. The company has committed to help on three major fronts: developing models for managing HIV/AIDS through Medical Research, improving care and support through Community Outreach and Education, strengthening/building capacity in public health, medical research, and community intervention through local and international programs.

Bristol-Myers Squibb is an active partner with the medical community to look for practical and sustainable solutions for patients in settings where resources are limited but needs are great. These programs are being coordinated with the health research institutions of the five countries.

We have created the Bristol-Myers Squibb HIV Research Institute to facilitate medical research focusing specifically on women and children with HIV/AIDS. The company expects this research to generate clinically relevant data that can be used by the African medical community and policymakers to develop a range of practical, cost-effective treatments for resource-limited settings.

A representative scientific advisory board, in consultation with health authorities, will ensure a research agenda consistent with the research agendas of the individual countries. The advisory board will provide direction for the studies, review results and hold an annual colloquium to share information widely. A fellowship program will be developed to strengthen the medical research capacity in support of the needs in each country.

HIV/AIDS has placed a tremendous demand for services on already overburdened NGOs and community-based organizations (CBOs) in these countries. The Community Outreach and Education Fund, supported by the Bristol-Myers Squibb Foundation, will strengthen NGOs and CBOs by providing funding that will enable them to better serve women and children with HIV/AIDS. Orphan and home-based care will be priorities for the community-based organization grants.

Our sense of urgency in assessing the situation in Africa, setting up the program infrastructure, and deploying resources was matched only by the pace and intensity of the HIV/AIDS pandemic itself. As a result SECURE THE FUTURE™ has launched what we refer to as "Big Ideas"-- a number of innovative investigations and/or interventions meant to generate a major impact on the course and/or consequences of HIV/AIDS in Africa.

The Community Education and Outreach component will focus on peer counseling to educate women of child-bearing age, as well as pregnant women, to determine their health status and provide options for testing, psychosocial support and treatment and help for women who have been the victims of sexual violence. We will also focus on transforming community devastation into self-driven economic development by creating income generation programs that improve the social and economic status of women infected and affected by HIV/AIDS. We will improve home-based and hospice care, food and security as well as provide orphan care and counseling on death and dying. We have implemented an innovative communication strategy, utilizing the theatre through drama and radio to help amplify the messages regarding prevention and destigmatization—increasing the awareness and empathy toward those living with HIV/AIDS or whose family members are infected.

To date five Community Education and Outreach grants have been approved. A fellowship program was developed to strengthen public health capacity in support of the needs in each country. Last August Forty-four fellows in public health began training towards their Masters of Public Health. By 2004, we expect to have trained over 200 fellows in public health. In Swaziland we provided a grant that would allow for the training of over 2,500 rural healthcare workers as part of the HIV/AIDS Nursing Program developed at Baylor.

On the medical research side, we will seek to identify alternative & affordable treatment paradigms for HIV, opportunistic infections and supportive care, including mother-to-child transmissions management of pediatric AIDS. A bi-directional physician exchange program with Baylor College of Medicine has been initiated. Additionally, sixteen other medical research projects have been approved including the establishment of the first reference lab in the developing world to support the study of HIV-1C and a program that will enable AIDS physicians in Africa and the West to share knowledge over the internet. We are also funding a study that would examine the effect of sexually transmitted diseases on the transmission rate of HIV/AIDS, and are providing drugs for post exposure

prophylaxis of women who are victims of sexual violence and rape. Below is a complete list of projects approved to date:

**BMS Foundation Community Education & Outreach Fund**

TITLE	INSTITUTION	\$000s
Fellowships in Public Health, with emphasis on AIDS care	National School of Public Health, MEDUNSA	1,795
HIV/AIDS Prevention and Home Based Care for Rural Health Workers	University of Illinois, College of Nursing, Missionary Sisters of the Sacred Heart	661
Counselling and Home Based Care Project	Botswana Christian AIDS Intervention Program	591
Coordinated Orphan Response: Region F KwaZulu Natal	AIDS Foundation of South Africa	37
Reetsanang Association of Community Drama Groups	Information, education and awareness and social mobilisation through drama	32
Total		\$3,116

**BMS Medical Research Grants**

TITLE	INSTITUTION	\$ 000s
Establish Pioneering Reference Lab/Emergence of HIV-1C Nucleoside Drug Resistance in Botswana	Harvard AIDS Institute-Princess Marina	\$18,100
Bi-directional physician exchange program	Baylor College of Medicine	\$2,200
Internet-Medical Mentor Program	IAPAC (International Association of Physicians in AIDS Care)	\$335
Self-Care Symptoms Management For Persons With HIV Disease	University Of California	\$294
Burden Of Disease Caused By Respiratory Viruses And Pneumocystiscarinii	University of the Witwatersrand	\$105
Bismuth Subsalicylate (Bss) In The Treatment Of Diarrhea Children in Human Immunodeficiency Virus Infected	University of Cape Town	\$91
Prevalence of STD amongst students at the UDW Health Clinic and the reasons to Syndromic Management	University of Witswatersrand	\$43
The Cost-Effectiveness Of HIV / Aids Treatment In The Western Cape	Somerset Hospital	\$40
Pneumonia In African HIV-Infected Children Hospitalized For Acute Lower Respiratory Tract Infections	University of the Witwatersrand	\$35
Cell-Associated Virus in Breastmilk of HIV Seropositive Women	University of Natal	\$27
A Study To Increase Partner Compliance Of STD Diagnosed Patients	Bethal Hospital	\$11
The Pharmacokinetics of Cotorimoxazole in HIV Infected Children	University of Capetown	\$7
Total		\$21,288

As stated earlier, this project is a multi-sectoral approach to combating HIV/AIDS. We have a firm belief that one of the most effective weapons in the fight against HIV/AIDS is the public-private partnership. Because the pandemic is highly complex, any one sector or organization cannot win the fight. We need the involvement of governments, civil society, the private sector, educational institutions and communities of faith.

That is why we have partnered with organizations like UNAIDS-the Geneva, Switzerland based entity that brings together the efforts and resources of seven United Nations system organizations to help the world prevent new HIV infections, care for those already infected, reduce the vulnerability of individuals and communities to HIV/AIDS, and mitigate the impact of the epidemic;

Baylor College of Medicine-a Houston-based private medical school dedicated to promoting health for all people through education, research and public service. An internationally respected institution, Baylor ranks among the top 20 U.S. medical schools in federal research funding;

Morehouse School of Medicine-the Atlanta based historically based institution established to recruit and train minority and other students as physicians and biomedical scientists committed to the primary health care needs of the underserved;

MEDUNSA (the Medical University of southern Africa)- Pretoria-based MEDUNSA is the largest health sciences academic institution in Africa. MEDUNSA's mission is to empower the educationally disadvantaged community of southern Africa by providing excellent community-oriented tertiary education, training and research in health and related sciences, and to promote services at all levels of health care in the community; and

Harvard AIDS Institute-located in Boston Massachusetts, is dedicated to conducting and catalyzing research to end the worldwide HIV/AIDS epidemic. The Harvard AIDS Institute was created in 1988 to expedite and expand the already substantial amount of AIDS research conducted at Harvard University and its affiliated hospitals.

We believe the model of mutual support and cooperation, as embodied by SECURE THE FUTURE™ provides great hope in making progress against HIV/AIDS. It is our sincere hope that through the invaluable power of partnership we will make a significant impact against HIV/AIDS, and on the lives of people in southern Africa and across the world. Thank you.